

COMBINED DECLARATION AND POWER OF ATTORNEY IN PATENT APPLICATION

Attorney Docket No: SIMU0008

As a below-named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name;

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which patent is sought on the invention entitled: **LAPAROSCOPIC AND ENDOSCOPIC TRAINER INCLUDING A DIGITAL CAMERA**, the specification of which was filed as application Serial No. 10/672,274 on September 24, 2003.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 (a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Foreign Serial Number(s)	Country	Date Filed	Priority Not Claimed	Certified Copy Attached?		<u>Status</u>
n/a				YES	NO	

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below.

Provisional Application Serial Number(s)	Filing Date(s)
n/a	-

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s), or Section 365(c) of any PCT international application designating the United States of America, listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

<u>U.S. Parent</u> <u>Application Number(s)</u>	PCT Parent Number(s)	Parent Filing Date(s)	Parent Patent Number(s) (if applicable)
n/a	n/a		

I hereby appoint the following attorney to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: Ronald M. Anderson, Registration No. 28,829; Michael C. King, Registration No. 44,832; and Thomas R. Marquis, Registration No. 46,900. Address all telephone calls to Ronald M. Anderson at telephone No. (425) 688-8816.

Address all correspondence to:

Law Offices Of Ronald M. Anderson 600 - 108th Avenue N.E., Suite 507 Bellevue, WA 98004

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Christopher C. Toly	US	
Inventor's Full Name	Country of Citizenship	
2317 West Newton Street, Seattle, V	Washington 98199	
Residence Address Same as Above		
Post Office Address	10/17/03	
INVENTOR'S SIGNATURE	/DATE/	

Section 2Section 1: Section 2: Section 2